



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5759

|  |   |                               |   |   |                                |
|--|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>08/877,155   | <b>FILING OR 371(c) DATE</b><br>06/17/1997<br><b>RULE</b>   | <b>CLASS</b><br>604           | <b>GROUP ART UNIT</b><br>1615   | <b>ATTORNEY DOCKET NO.</b><br>ARC2466R1 |                                |
| <b>APPLICANTS</b><br>MICHEL J. N. CORMIER, MOUNTAIN VIEW, CA;<br>ARMAND P. NEUKERMANS, PALO ALTO, CA;<br>BARRY BLOCK, LOS ALTOS, CA;<br>FELIX T. THEEUWES, LOS ALTOS HILLS, CA;<br>ALFRED A. AMKRAUT, PALO ALTO, CA;   |   |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/019,990 06/18/1996  |   |                               |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/05/1997</b>   |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Allowance<br>Acknowledged <u>Shennedy</u><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>8  | <b>TOTAL CLAIMS</b><br>52               | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>D BYRON MILLER<br>ALZA CORPORATION<br>950 PAGE MILL ROAD<br>PALO ALTO, CA943030802   |   |                               |   |   |                                |
| <b>TITLE</b><br>DEVICE AND METHOD FOR ENHANCING TRANSDERMAL FLUX OF AGENTS BEING DELIVERED OR SAMPLED  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>3500   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |